



STATE OF TENNESSEE
COUNCIL ON CHILDREN'S MENTAL HEALTH

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Council on Children's Mental Health
April 21, 2011
10 a.m. – 3 p.m.
Ellington Agricultural Center – Ed Jones Auditorium

MEETING SUMMARY

Attendee List:

Chrystal Armstrong
Sumita Banerjee
Louise Barnes
Sonya T. Beasley
Bonnie Beneke
Shawn Brooks
Jennifer Burger
Reneese Carter
Nicole Cobb
Janet Coscarelli
Michael Cull
Katrina Donaldson
Carol Dunaway
Richard Edgar
Deborah Gatlin
Nneka Gordon
Kathy Gracey

Vickie Harden
Craig Anne Heflinger
Mike Herrmann
Kurt Hippel
E. Ann Ingram
Jeanne James
Natalie Jefferson
Dustin Keller
Richard Kennedy
Rachel Krauss
Paul Lefkowitz
James Martin
Shelley Martin
Jacqueline Moore
Amber Morrison
Rob Mortensen
Linda O'Neal
Jason Padgett

Cindy Perry
Nichole Pfohl
Kathy Rogers
Mary Rolando
John Rust
Mary Linden Salter
Susan Steckel
Sarah Suiter
Millie Sweeney
Doug Varney
Heather Wallace
Michael Warren
Carole Beltz White
Ellyn Wilbur
Alysia Williams
Lygia Williams
Marie Williams

Welcome and Introductions (Commissioner Doug Varney and Linda O'Neal)

- O'Neal thanked everyone for participating in today's meeting before a holiday weekend.
- She also reminded participants a group meets before and after meetings to ensure members, especially youth and family, are prepared and understand the activities taking place.
- Commissioner Varney had to leave early and included his budget remarks for the department in his introductory remarks.
- He stated he was pleased with the budget process and the department's budget submitted. If the current budget is adopted, he confirmed the central office was required to release 15 personnel and reclassify three others. Revenue has been better than anticipated.

- Western Mental Health Institute closed a partially filled unit and eliminated eleven staff positions. The most anticipated cuts funded with nonrecurring dollars in previous years were restored in children's services. He stated there was a better outcome than first anticipated for TDMH regarding cuts within the department.

MOTION: MOTION (MICHAEL CULL) TO ACCEPT MEETING SUMMARY FOR FEBRUARY 17, 2011 MEETING (SECOND, ELLYN WILBUR). MOTION PASSED UNANIMOUSLY.

Legislative Update (Linda O'Neal)

- O'Neal explained the most concerning piece of legislation is the abolishment of the joint oversight committees. Both houses are expected to pass this measure despite several groups advocating for the more productive oversight committees including the Select Committee on Children and Youth.
- Legislation established a council to bring together members of the Senate and House responsible for reducing number of children in state custody.
- Lt. Gov. Ramsey stated he will attempt to find new positions for the staff of the oversight committees.
- O'Neal asked participants to reference *the Blue Sheet "Key Points in Meth Proposal"*. This is a worksheet provided by Kurt Hipple with TDMH. Legislation is proposed to try to reduce meth production in Tennessee.
- CCMH and TCCY legislation passed the house and are in committee in the Senate. O'Neal believes both of these entities will be continued this year.
- She also discussed legislation creating a juvenile sex offender registry in Tennessee. This would bring the state in compliance with the federal Adam Walsh Act. Current versions of the bill would create a private never public juvenile registry for first time offenders of four types of sexual offenses. If another offense is not committed by their 25th birthday, the juvenile can petition the Tennessee Bureau of Investigation to be automatically removed.

Overview of Fiscal Year 2012 Budget (Representatives of Child-Serving Departments)

Tennessee Commission on Children and Youth and Overall Budget Comments (O'Neal)

Refer to white stapled handout dated April 18th 2011, Senate General Welfare, Health and Human Services

- O'Neal stated the governor presented the 2012 budget during the State of State address on March 14, 2011. It is currently pending in the General Assembly.
- TCCY is expected to lose very little state funding comparatively. We do expect some federal cuts to our Juvenile Justice funding resulting in the reduced amount available for grants and contracts to agencies, and may result in some positions being lost.
- O'Neal reported the proposed 8.5 percent cut to the TennCare mental health provider reimbursement rate is of greatest concern.
- O'Neal also discussed several other funding cuts of interest:

- Elimination of Regional Perinatal Center grants through a TennCare reduction of \$2,272,800. The elimination of these services would hamper the outcomes of pregnancies and high-risk newborns. They are critical in assisting with low-birth-weight babies and reducing the infant mortality rate in Tennessee.
- Elimination of Tennessee Chapter of American Academy of Pediatrics (TNAAP) Provider Education Grant. This grant works with both federal funds of \$234,100 and state funds of \$234,100 totaling \$468,200; it provides training for pediatricians, family physicians and nurses. The training includes a focus on early identification of special medical, developmental and behavioral problems and the importance of linking young children with special needs with Tennessee Early Intervention Services (TEIS) and to specialized services through effective use of Early and Periodic Screening, Diagnosis and Treatment (EPSDT).
- Transfer of all GOCCC Programs to the Department of Health effectively eliminating the GOCCC.
- O'Neal mentioned several grant projects had been delayed because they could not get budget expansion approval from the legislature, ultimately delaying the grant's startup, including:
 - Early Childhood Advisory Committee
 - Home visiting program
- She also noted that several departments are unable to present today and may either present at a later meeting or send information to participants. CoverKids is currently not expecting any cuts, benefit or enrollment reductions.

TennCare (Dr. Jeanne James)

Refer to the PowerPoint emailed after the meeting entitled "Understanding the TennCare Budget"

- Dr. James stated this year's cuts seem more drastic because for the past two years one-time funding has offset the cuts. This year additional funding is not available so all the previously recommended cuts are present. She stated TennCare is concerned about maintaining enrollment numbers and maintenance of effort as this would reduce the amount we are able to draw down from the federal government. She also discussed the difficulty and the limited choices of areas to cut funding in TennCare:
 - Enrollment: decreasing the number of people enrolled in TennCare. The Bureau has chosen not to make these types of cuts at this time.
 - Provider Reimbursement: reducing how much we pay the provider for services rendered to enrollees. This has been limited because it will affect provider networks and how many providers will be willing to accept TennCare.
 - Cost Sharing: requiring enrollees to pay a portion of the cost of the service such as a co-pay. Most commercial insurance uses this method to control cost. However, this is restricted by the federal government and can only be used sparingly. Also, you cannot deny a person services based on their inability to pay the co-pay, this option effectively becomes another provider cut.
 - Benefits: decreasing benefits offered to enrollees. TennCare has proposed some benefit cuts but also attempts to ensure these are minimal.

- Dr. James noted over 700,000 TennCare enrollees are children and pregnant women.
- Starting in the last fiscal year, hospital providers suggested and encouraged the legislature to approve a hospital fee. Establishing this fee provides additional matching funds to avoid some of the proposed cuts. The hospital fee must be renegotiated and approved by the legislature again this year because it was initially established for one year only. The proposed fee does not provide sufficient funding to cover all proposed cuts.
- Proposed reductions still in place after the hospital tax:
 - 8.5 percent rate reduction for:
 - Nursing home providers;
 - Transportation services;
 - Mental Health providers;
 - Lab and Ex-Ray services; and
 - Home Health providers.
 - Decrease in Emergency Room physician payments for non-emergency services.
 - Decrease in reimbursement for c-section deliveries.
 - Adult medication changes and reductions.
- Dr. James also mentioned the possibility of the state receiving additional one-time federal funds because of a long-term dispute over the incorrect enrollment practices for Social Security Income (SSI) and Social Security Disability Income (SSDI). SSDI requires states to fund a portion of the medical expenses for these enrollees. The federal enrollment practices were corrected several years ago but states are still in the process of seeking reimbursement for the funding they provided to SSDI recipients who should have been on SSI. No final resolution has been made by the federal government so there is no assurance the states will receive any funding.

Department of Education (Mike Herrmann and Nicole Cobb)

- Herrmann stated the Basic Education Plan (BEP) will continue to be fully funded as it has been over the past several years, anything beyond the BEP has been more recently funded with stimulus funds.
- Herrmann mentioned several proposed cuts to programs of note to the CCMH:
 - \$413,000 cut in family resource centers, 103 family resource center sites are being cut to \$29,000;
 - \$1.3 million cut in Tennessee Early Identification System (TEIS) program;
 - \$3 million to after school programs; and
 - Losing 52 administrative positions, 35 of them part time.
- Nicole Cobb presented information about a grant targeting school climate recently received by the Department of Education from the US Department of Education for \$2.5 million over four years.
- She stated Tennessee's efforts will be based on a federal school climate model that includes engaging in relationships, social and emotional safety, and physical environments. The School Climate Advisory committee serves as the administrative council for the grant and has created a center for school climate focusing on:

- Formal measures of school climate;
- Expansion of Tennessee longitudinal data systems;
- Creation of a web portal and data dashboards;
- Development of an online registry for evidence based interventions; and
- Provision of direct support to schools with the most fragile school climates.

Department of Human Services (Paul Lefkowitz)

- Lefkowitz discussed the federal funding history for the Department of Human Services (DHS) by explaining their block grant has remained around \$191 million a year and with a supplemental grant issued for \$21 million a year since 1996. DHS has been notified and currently in discussions with federal funding sources of the impending cuts to these grants this year and in the coming fiscal year. The federal government has been operating on continuing resolutions for the current fiscal year and is still cutting its expenditures for this fiscal year. Lefkowitz stated DHS is preparing for some large funding cuts in some areas.
- Lefkowitz noted DHS is attempting only to reduce contracts where necessary but in some cases will have to eliminate total funding for certain programs. He stated these are not easy choices and the programs reduced are great programs. The department had to make some undesirable choices.
- He noted the following budget reductions:
 - Childcare is expected to receive the largest decrease with five or six separate contracts being severely limited or reduced.
 - Renewal House is one of these contracts being reduced. This program allows mothers to receive treatment along with their family.
 - The contract with Legal Aid is being reduced. This provides free services to assist families in the SSI process. Otherwise, families must use private legal assistance costing families a portion of their SSI benefits.
 - The teen parenting program in Memphis is being eliminated. This program helps teen parents stay in school and balance the stress of childcare and parenthood.
 - The contract with Metro Nashville providing free tax assistant is also being eliminated.

System of Care Grant Opportunity (Susan Steckel and Dustin Keller)

Refer to handout, "Substance Abuse and Mental Health Services Administration (SAMHSA) System of Care Expansion Planning Grants"

- Keller stated SAMHSA released a new request for applications for a one-year grant to sustain and expand system of care on a statewide scale. Grant funding will range from \$300,000 to \$800,000 depending on geographical size and demographics of the population to be served. Application deadline is June 2, 2011.
- Steckel encouraged all CCMH participants willing to participate in writing the grant to contact her or Keller. A group will start meeting soon to figure out goals and objectives for the application.

Community Mental Health Budget Impact (Vickie Harden and Ellyn Wilbur)

Refer to the handout, “Now More than Ever: A white paper presented by Tennessee Coalition for Mental Health and Substance Abuse Service”

- Wilbur discussed the group creating the white paper consisted of public and private providers and advocates. She stated the group was somewhat pleased with the budget as many of the recommendations in the white paper were being funded again. She mentioned mental health crisis services, the behavioral health safety net and children’s mental health services were mostly maintained.
- Wilbur also stated she believes the new TennCare provider rate cuts will result in staff reductions, longer waiting times, and less access to mental health services, particularly in rural areas and in the community mental health centers.
- Harden acknowledged Volunteer Behavioral Health would be impacted by approximately \$2 million dollars if the rate reduction is passed. She also noted Volunteer recently absorbed a \$600,000 loss because of the elimination of the CRG/TPG assessments and the related funding.
- Harden stated based on Volunteer’s current client population, an 8.5 percent cut would roughly mean approximately 3,000 children would go without services at Volunteer alone.

Tennessee Lives Count Project (Lygia Williams and Jason Padgett)

Refer to yellow handout of slides, “Tennessee Lives Count, Juvenile Justice Project”

- Williams reported the Project is currently in its second grant cycle.
- She stated the first grant cycle expected to train 14,000 adults and actually finished training over 19,000 in a statewide approach to suicide prevention. Tennessee has been called a template or model for other states.
- She noted the second grant cycle is more specifically focused on the Juvenile Justice System. Every adult working in the juvenile detention centers has or will receive a two-day suicide prevention training. The project is using data obtained after these trainings to create a curriculum specifically for staff serving children in the juvenile justice system. This curriculum would be the first in the nation.
- Padgett stated the training curriculum will be geared toward the particular policies and procedures of juvenile facilities and it includes an annual two-hour renewal training component. This new eight-hour training is for all facility staff including support and janitorial staff. The refresher training consists of review of items discussed in initial training and any changes to the facility’s suicide prevention protocol.
- Components of the new curriculum include:
 - Attitudes about suicide;
 - Warning signs and systems;
 - Factors of juvenile justice environment;
 - How to ask someone about suicide;
 - Policies and Procedures of the facility; and
 - How a person can receive help in the facility.

Children's Mental Health Day Overview (Sonya Beasley and Jennifer Burger Facilitating)

Refer to the pink handout "National Children's Mental Health Awareness Day"

- Beasley stated May 3, 2011 is designated by SAMHSA as Children's Mental Health day; the month of May is national mental health awareness month. Speaking engagements create opportunities to raise awareness of the stigma of children's mental health, and offers information to individuals needing assistance.
- Burger stated a committee in Mule Town has worked together to produce multiple items for mental health awareness month. The committee has created signage, stickers, flowerpots and a float to enter in the local Mule Town parade in Columbia. Participants who would be willing to pass out information or need any of these items are encouraged to talk with Beasley and Burger.
- Others discussed specific activities occurring around the state in observation of Children's Mental Health Day. Participants can refer to Tennessee Voices for Children's website for more information. (www.tnvoices.org).

Lead Family Contact Training (Susan Steckel)

- Steckel stated TDMH hosted a two and a half day training for all the System of Care initiatives in the state around family-driven care and the need for lead family contact positions within the initiatives. More information will be provided about this training at future CCMH meetings.

CCMH By-Laws Update and Workgroup Next Steps Planning (Dustin Keller)

- Keller stated the on-going need for the Council to plan for the next report due to the General Assembly in 2012. To this end, the workgroup co-chairs have planned a retreat in June to assist with mapping out the next steps for CCMH. This information and a draft next steps plan are scheduled to be presented at the next CCMH meeting.
- He also stated the by-laws have been placed on hold until after the co-chair retreat in order to include any new suggestions or structure changes.

Discussion Plans for Future Meetings (Linda O'Neal Facilitating)

- The next meeting is scheduled for June 16, 2011.
- O'Neal recommended the group needs to continually consider funding as an obstacle and identify ways the statewide plan could work to redirect and use existing funding streams.
- Other meeting agenda topics provided by participants:
 - Provide more specific tasks to be completed in-between meetings;
 - System of Care Initiatives evaluation measures and results;
 - Results of Workgroup Co-Chair Retreat; and
 - Lead Family Contract Training.